EDUCATIONAL INFORMATION - FORM A

NAME:	D. O. B	•
ADDRESS:		
CITY/STATE/ZIP:		
Last School Attended:	County: _	
What year did you attend:		
School District / County: _		
1. Do you have a regular hi	gh School diploma? Yes□ No□	
2. Do you have a GED?	Yes 🗌 No 🗌	
3. Do you have a special ed	lucation diploma? Yes \(\square \) No \(\square \)	
4. Were you enrolled in sch	nool before you were arrested? Yes	□ No □
	ial education or related services, <u>or</u> we in your school program before you very	_
6. If you are over 18, do yo	u wish to obtain educational services	?
Yes If you marked "No" to question #6, ple	No ease explain below why you do not wish educational	l services:
Detainee	Correctional Officer	Date

NOTICE: In compliance with an agreement with the U.S. Department of Education, Office of Civil Rights, this form must be completed and forwarded to the local education agency serving the jurisdiction where
This detention center is located.